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CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being submitted by First Class mail to the US Patent and Trademark Office: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 or transmitted by facsimile to the U.S. Patent and Trademark Office, Fax No. (571) 273-8300.

Date: 6/21/06By: Patti Hespell

Patti Hespell

Mail Stop RCEIN THE UNITED STATES PATENT AND TRADEMARK OFFICE**In Re: Patent Application of Charles A. Eldering**

Conf. No.: 3387 : Group Art Unit: 1751
Appln. No.: 09/857,257 : Examiner: Nguyen, Tri V
Filing Date: 01 June 2001 : Attorney Docket No.: T709-12
Title: Advertisement Auction System

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AFTER FINAL REQUEST FOR CONTINUED EXAMINATION UNDER 37.C.F.R.1.114

This is a request under 37 CFR 1.114 for continued examination (RCE) of the above identified application in response to the Final Office Action dated May 18, 2006. Enclosed are the following in support of the RCE under C.F.R. 1.114:

- ☒ An Amendment/Request for Reconsideration.
☒ An Information Disclosure Statement and PTO/SB/08A
☐ A Petition for Extension of Time to _____ for the pending application.
☐ Other: _____

The following fees are enclosed:

- ☒ RCE fee of \$790.00 required under 37 C.F.R. 1.17(e) 06/22/2006 MBINAS 00000038 501535 09857257
☐ Extension of Time fee in the amount of \$____.00 01 FC:1001 790.00 DA

- 1 -

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Application No. 09/857,257

☐ Additional claim fees of \$____.00 for excess claims submitted in the enclosed

Amendment, calculated as follows:

| | | | | | SMALL ENTITY | | LARGE ENTITY | |
|---|---|-----|---------------------------------------|------------------|--------------|---------------|--------------|---------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDIT. FEE | RATE | ADDIT. FEE |
| TOTAL | 43 | (-) | 46 Or 20 | 0 | x 25 | | x 50 | 0.00 |
| INDEP. | 6 | (-) | 10 Or 3 | 0 | x100 | | x200 | 0.00 |
| [] 1 st PRESENTATION OF MULTIPLE DEPENDENT CLAIMS | | | | | +\$140 | | +\$280 | |
| | | | | | TOTAL | | TOTAL | 0.00 |

☒ The Commissioner is hereby authorized to charge and/or credit Deposit Account No. 501535 as noted below. A duplicate of this sheet is enclosed.

- ☒ Any overpayments or deficiencies in the above calculated fee(s).
- ☒ RCE fee in the amount of \$790.00.
- ☐ Extension fee in the amount of \$____.00.
- ☐ Additional claim fees in the amount of \$____.00 as calculated above.
- ☒ Any additional fees required under 37 C.F.R. §§ 1.16 or 1.17.
- ☒ In the event that a Petition for Extension of Time is required, but not enclosed, please charge any extension fee under 37 C.F.R. § 1.136(a) to the Deposit Account noted above.

CORRESPONDENCE ADDRESSDate: 6/21/06

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- 2 -

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